

## 24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

10/24/2008 19 : 22

430 South Capitol Street, SE

2nd Floor

Washington

DC

20003

FEC ID No. C00000935

☒ 24-Hour Notice ☐ 48-Hour Notice

## SCHEDULE E (FEC Form 3X)

## ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 2

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

FEC IDENTIFICATION NUMBER

C C00000935

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

McMahon, Squier, Lapp and Associates, Inc.

Date

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Amount

4975.22

Mailing Address

300 N. Lee Street

Suite 500

City

Alexandria

State

VA

Zip Code

22314

Purpose of Expenditure

Media Production

Category/  
Type

004

Office Sought: ☒ House

State: NV

☐ Senate

District: 03

☐ PresidentialCheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : \_\_\_\_\_

Transaction ID: SE-855829

Date of Dissemination 10/23/08

Calendar Year-To-Date Per Election

1547920.16

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

McMahon, Squier, Lapp and Associates, Inc.

Date

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Amount

4975.21

Mailing Address

300 N. Lee Street

Suite 500

City

Alexandria

State

VA

Zip Code

22314

Purpose of Expenditure

Media Production

Category/  
Type

004

Office Sought: ☒ House

State: NV

☐ Senate

District: 03

☐ PresidentialCheck One: ☐ Support ☒ OpposeDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : \_\_\_\_\_

Transaction ID: SE-855830

Date of Dissemination 10/23/08

Calendar Year-To-Date Per Election

1547920.16

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures .....

9950.43

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Brian L. Wolff

Signature

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

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## SCHEDULE E (FEC Form 3X)

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PAGE OF 2 / 2  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee		FEC IDENTIFICATION NUMBER <b>C</b> C00000935	
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee CapAd Communications, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 5620 James Gunnell Lane		Amount 1382.68	
City Alexandria	State VA	Zip Code 22310	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential
Purpose of Expenditure Phone Banking	Category/ Type	007	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Dina Titus		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		Transaction ID: SE-855749 Date of Dissemination 10/23/08	
1547920.16			
Full Name (Last, First, Middle, Initial) of Payee CapAd Communications, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 5620 James Gunnell Lane		Amount 1382.67	
City Alexandria	State VA	Zip Code 22310	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential
Purpose of Expenditure Phone Banking	Category/ Type	007	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: John Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		Transaction ID: SE-855750 Date of Dissemination 10/23/08	
1547920.16			

(a) SUBTOTAL of Itemized Independent Expenditures .....	2765.35
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	12715.78
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Brian L. Wolff Signature	M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8